DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD OF DETERMINING THE TOPOLOGY OF A NETWORK OF OBJECTS the specification of which (check one)

X_ is attached hereto.

was filed on
Application Serial No
and was amended on

as

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Priority Claimed

Prior Foreign Applications(s)

(Number) (Country) (Day/Month/Year Filed) Yes No

(Number) (Country) (Day/Month/Year Filed) Yes No

(Number) (Country) (Day/Month/Year Filed) Yes No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

08/558,729 (Application Serial No.)	11 16 1995 (Filing Date)	Pending (Status) (patented, pending, abandoned)
08/599, 310 (Application Serial No.)	02 09 1996 (Filing Date)	Pending (Status) (patented, pending, abandoned)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trade Mark Office connected therewith.

EDWARD E. PASCAL - Reg. 22934

Date

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Full Name of third joint inventor	Date	
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CORRESPONDENCE ADDRESS
Application

Address to:

Assistant Commissioner for Patents Washington, D.C. 20231

Application Number	09/749,671
Filing Date	Nov 15, 1996
First Named Inventor	Dawes
Group Art Unit	2151
Examiner Name	A. Oberley
Attorney Docket Number	551P01US-P2

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This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor. Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). X Attorney or Agent of record. Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number				
Typed or Printed Name Harold, Cy. Baker - Reg. 19333 Signature				
Date August 16, 2001 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple				
NOTE: Signatures of all the invent forms if more than one signature is	ors or assignees of record of the entire inte required, see below.	rest or their	r representative(s)) are required. Submit multiple
Total offorms are submitted.				

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